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\*\* CONTINUING DATA \*\*\*\*\*

 \*\* FOREIGN APPLICATIONS \*\*\*\*\*  
 NA OM  
 NA OM

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY WA	SHEETS DRAWING 10	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 7
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

## ADDRESS

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## TITLE

Non-uniform resolutions for printing

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